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HOUSEKEEPERS' CHAT Wednesday, May 17, 1933.

(FOR BROADCAST USE ONLY)

Subject: "Meals for the Convalescent." Information from the Bureau of Home Economics, U.S.D.A.

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Sometime or other sickness visits most households and brings with it special problems for the homemaker. One problem, and a very important one, is food -- planning, preparing and serving meals for the patient. After sickness comes that difficult getting-well period when the convalescent needs food to build him up, yet lacks appetite. Don't you remember when Junior was getting over measles, how thin he was, yet how he turned up his nose at the very mention of food? Don't you remember when Aunt Sally was recovering from grip and declared that she couldn't touch a bite of anything? And don't you remember when Uncle Bill lost his usual hearty appetite and lay in bed, the crankiest man alive when his meals came in?

Food plays a big part in recovery from any illness. So the game is to serve the right food and make it attractive enough to tempt the most listless patient. Tempting food probably does more good in the sick room than anywhere else because it helps wake dull appetites. Food for the sick needs to appeal to the eye and be so well prepared that it has a delicious taste and odor. Such food not only nourishes the body but it also cheers up spirits. And we all know how good spirits hasten recovery.

The doctor may prescribe a liquid, or a soft, or a normal diet. But that doesn't mean that this diet will be a success just dosed out to the invalid like medicine. He needs not only to swallow food but also to enjoy it. Even a liquid diet, which contains very few different foods, may be either monotonous and uninviting or cheering to the appetite. Preparation and serving make the difference. Recovery often depends on the cook as well as the doctor.

Foods on the invalid's list are usually those that contain the most nourishment with the least tax on the digestive organs. Foods which answer this requirement are milk, eggs, well-cooked cereals, fruit juices, and pureed fruit and vegetable pulp. With the exception of fruit, these foods all have a bland flavor. This lack of flavor is the reason that diets for the sick often become insipid and tiresome. Patients in hospitals frequently complain that the food tastes alike day after day. This tiresome monotony isn't necessary. You can cook the same foods in many different ways, you can dress them up differently so they will never look the same, and you can season them in many different ways. Also, you can use different china, you can arrange the tray differently, and add a different little flower or a fern by way of decoration. Generally the surprise method is a good one to use in feeding an invalid. Unless he asks for a special dish, don't discuss the menu with him. Just bring in a good-looking trayful and let the food for each meal come as a surprise.

Now about variety on the invalid's diet. First, broths and clear soups. How to make them different? Season the soup as it cooks in different ways -- sometimes with celery leaves, sometimes with chopped celery or onion, a bit of bay

leaf or parsley. Of course, you'll strain these out with the meat before serving. Combining two soups also makes a change in flavor. Adding a little tomato juice to a meat broth gives variety in flavor and appearance. Or you can add a spoonful of cream, beef juice, a cube of tomato gelatin or a beaten egg yolk just before removing from the fire. These additions please the taste and add to the nourishment of the food.

Fruit juices are popular in invalid diets. Their sugars are in a form easy to assimilate, they supply minerals and vitamins, and they have a slight laxative effect. Moreover, they are excellent appetizers. And you can serve fruit juices in delicious-looking chilled drinks or in gelatin desserts or salads or in ices or sherbets. Citrus fruit juice -- orange, lemon or grapefruit -- and tomato juice are especially recommended because they are high in vitamin C.

Milk and eggs are two foods that many invalids must depend on for building materials over long periods of time. No need to let either of these good foods become monotonous. You can serve milk in cream soups, frozen desserts, custards, tapiocas, rice puddings, gelatin puddings, cocoa malted drinks and many other popular drinks and desserts. As for eggs, think of all the ways to serve them! On one day your invalid can have an omelet, either a fluffy one or a flat one. Another day he can have scrambled eggs, made in the upper part of the double boiler; or an egg poached in milk or water; or a soft-cooked or coddled egg; or a delicate shirred egg, cooked in the oven. Or you can serve him eggs made into a simple pudding like a custard or a whip or made into an egg nogg.

As for cereals, here again you can give your patient plenty of variety. Many different cereals are on the market today, so breakfast porridge can be different each morning. Lots of different ways to serve simple, inexpensive cereals. Take rice, for example -- light, fluffy, boiled rice with each grain whole and separate. With cream it is a morning cereal. With butter or gravy, it becomes a vegetable to serve with the main course. Or you can serve it in soup. With sugar, cream and possibly a fruit like pineapple, banana or prunes, it makes a good dessert. Just one cereal. And so many different ways to serve it to an invalid.

So the moral of this story is that in feeding an invalid successfully, you need to appeal to the eye and the appetite. Surroundings make a big difference in the appetite of the person in bed. So be sure his room is in order before the meal tray comes in. Then, be sure the tray itself is immaculate -- clean linen, food served daintily. Plan to have the hot foods hot and the cold foods cold when they reach the bedside. Those little inexpensive covered casseroles, baking dishes and soup dishes with covers are convenient for hot foods. Cold foods look attractive in glass dishes. Finally, be sure you put plenty of variety into the invalid's diet. See that each meal has variety in color and flavor. And make each tray look different. Cook and serve foods in different ways. And count on surprise to add interest to the meal.

Time is up. So I'll give you two good convalescent menus first thing tomorrow. Then we'll answer questions.

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